

**State of Minnesota****District Court**

County

Judicial District: \_\_\_\_\_

Court File Number: \_\_\_\_\_

Case Type: \_\_\_\_\_

\_\_\_\_\_  
Plaintiff

vs.

**Affidavit of Service on Limited  
Removal from Conciliation Court**\_\_\_\_\_  
Defendant\_\_\_\_\_, being sworn/affirmed under oath,  
states:

1. I am over eighteen years of age and not a party in the above-entitled action.

Check and complete one of the following:

- ☐ 2. On the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, I served the Demand For Limited Removal upon \_\_\_\_\_, (plaintiff/defendant or attorney for \_\_\_\_\_), by placing a true and correct copy of it in an envelope addressed as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

which is the last known address of said party or attorney and depositing it, postage prepaid, in the United States mail.

- ☐ 3. I served a copy of the Demand for Limited Removal on \_\_\_\_\_, (title) \_\_\_\_\_, by delivering a copy personally to him/her at \_\_\_\_\_ at \_\_\_\_\_ am/pm, on \_\_\_\_\_.

- ☐ 4. After diligent search and inquiry, I was unable to locate \_\_\_\_\_ (name of party to be served), or any residence or business address for him/her at which service could be attempted.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Server

(Sign only in front of notary public or court administrator.)

Sworn/affirmed before me this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Telephone (\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Notary Public \ Deputy Court Administrator